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What differentiates admission criteria in acute and high dependency inpatient settings?

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Abstract

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WPA-0299 WHAT DIFFERENTIATES ADMISSION CRITERIA IN ACUTE AND HIGH DEPENDENCY INPATIENT SETTINGS?

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In all states of Australia, people who access the mental health systems experience them as largely crisis driven. Practices of mental health inpatient care vary according to model of care, regional expectations, and demands on existing resources. Etc. The overriding principle of inpatient care is the provision of effective care within a minimally restrictive environment, in accordance with the Mental Health Act. The decision to utilise more restrictive interventions include level of dangerousness, ability to cooperate with the care, adequacy of support system. Often admission is indicated to protect the patient and others and or to pursue diagnosis and treatment.

Methods: This is a retrospective study comparing various patient sociodemographic and clinical factors contributing to the clinical decision of admission across High Dependency Unit and inpatient unit in the same regional hospital in New South Wales, Australia over the past 12 months.

Results: The criteria for admission to different care levels don't confirm to uniform approved guidelines. It is decided by admitting clinician's subjective perception.

Conclusion: Admission to different levels of inpatient settings lacks defined criteria. While imperatives of professional skill and knowledge are a crucial factor and a well-defined admitting criteria has its own challenges, variations in models of service delivery are reflected in policy and procedures that influence practice and lead to differences in service responses and is experienced by patients as very confusing and It can affect patients appropriate care and use of resources.